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# TRANSMITTAL FORM



Attorney Docket No.	5297/32-3
Application Number	08/203,672
Filing Date	February 28, 1994
First Named Inventor	Brian H. Silver
Group Art Unit	2814
Examiner	Trinh, V.

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Amendment Under Rule 1.312(a) / Response to Restriction/Election Req.	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> Notice of Appeal to Board of Appeals and Interferences
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawings:	<input checked="" type="checkbox"/> Appeal Brief (triplicate) and \$320 fee
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request+ \$100 fee	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Information Disclosure Statement, PTO-1449, art	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Post Card Receipt
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-0930. A duplicate copy of this sheet is enclosed.	<input type="checkbox"/>

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## CALCULATION OF FEE

					Small Entity		Not Small Entity		
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total	9	Minus	20	0	x \$9=	0		x \$18=	
Indep.	4	Minus	4	0	x \$42=	0		x \$84=	
First Presentation of Multiple Dep. Claim					+\$140=	---		+\$280=	
					total add'l fee	\$ 0		total add'l fee	\$

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael H. Baniak Registration No. 30,608 BANIAK PINE & GANNON 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			Date June 19, 2003

## CERTIFICATE OF MAILING

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR §1.10 on the date indicated below and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

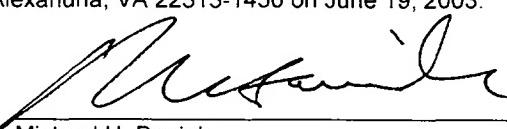
June 19, 2003

Signature		Date: June 19, 2003
Michael H. Baniak		

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 19, 2003.

June 19, 2003

  
Michael H. Baniak

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number 5297/32-3
	In re Application of: Brian H. Silver and Gotthilf Weniger	
	Application Number: 08/203,672	Filed: February 28, 1994
	For: Disposable Milk Collecting Bag for a Breast Pump	
	Group Art Unit: 2814	Examiner: Vikki Trinh

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Final Office Action of February 28, 2001 in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows:

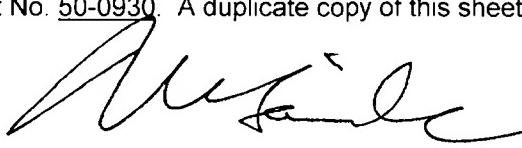
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 410.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 930.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,450.00
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ 1,970.00
<input type="checkbox"/> Applicant claims small entity status. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is \$_____.	
<input checked="" type="checkbox"/> A check in the amount of <u>\$110</u> is enclosed.	
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-0930</u> . A duplicate copy of this sheet is enclosed.	

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June 19, 2003

  
Michael H. Baniak  
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